

AMBULANCE REVENUE and COST REPORT
FIRE DISTRICT and SMALL RURAL COMPANY

Arizona Department of Health Services
Annual Ambulance Financial Report

SNOWFLAKE-TAYLOR AMBULANCE SERVICE

Reporting Ambulance Service

Address: PO BOX 1515

City: TAYLOR Zip: 85939

Report Fiscal Year

From: July 1, 2013 To: June 30, 2014
Mo. Day Year Mo. Day Year

I hereby verify that I have directed the preparation of the enclosed annual report in accordance with the reporting requirements of the State of Arizona.

I have read this report and hereby verify that the information provided is true and correct to the best of my knowledge.

This report has been prepared using the accrual basis of accounting.

Authorized Signature: _____

Date: 1/28/15

Print Name and Title: _____

CLINT BURDEN, CHIEF

Phone: _____

928.536.7900

Mail to:

Department of Health Services
Bureau of Emergency Medical Services
Certificate of Necessity and Rates Section
150 North 18th Avenue, Suite 540
Phoenix, AZ 85007-3248
Telephone: (602) 364-3150
Fax: (602) 364-3567

AMBULANCE REVENUE AND COST REPORT

FIRE DISTRICT and SMALL RURAL COMPANY

AMBULANCE SERVICE ENTITY:

SNOWFLAKE-TAYLOR AMBULANCE SERVICE

FOR THE PERIOD

FROM: July 1, 2013

TO: June 30, 2014

STATISTICAL SUPPORT DATA

Line No.	DESCRIPTION	(1) SUBSCRIPTION SERVICE TRANSPORTS	*(2) TRANSPORTS UNDER CONTRACT	(3) TRANSPORTS NOT UNDER CONTRACT	(4) TOTALS
1	Number of ALS Billable Transports:			518	518
2	Number of BLS Billable Transports:			136	136
3	Number of Loaded Billable Miles:			15,223	15,223
4	Waiting Time (Hr. & Min.):			-	
5	Canceled (Non-Billable) Runs:				246

AMBULANCE SERVICE ROUTINE OPERATING REVENUE

6	ALS Base Rate Revenue		\$	567,248
7	BLS Base Rate Revenue			148,954
8	Mileage Charge Revenue			202,975
9	Waiting Charge Revenue			-
10	Medical Supplies Charge Revenue			-
11	Nurses Charge Revenue			-
12	Standby Charge Revenue (Attach Schedule)			-
13	TOTAL AMBULANCE SERVICE ROUTINE OPERATING REVENUE		(Post to Page 3, Line 1) \$	919,177

SALARY AND WAGE EXPENSE DETAIL

GROSS WAGES:				** No. of FTE's
14	Management	.....	\$ 35,000	1.0
15	Paramedics and IEMTs	.....	\$ 146,000	3.0
16	Emergency Medical Technician (EMT)	.....	\$ 106,000	3.0
17	Other Personnel	.....	\$ 15,000	
18	Payroll Taxes and Fringe Benefits - All Personnel	.....	\$ 105,000	
19	Total Wages, Taxes & Benefits	(Sum Lines 14 through 18; Post to Page 3, Line 10)	\$ 407,000	

* This column reports only those runs where a contracted discount rate was applied.

** Full-time equivalents (F.T.E.) is the sum of all hours for which employees wages were paid during the year divided by 2080.

AMBULANCE REVENUE AND COST REPORT

FIRE DISTRICT and SMALL RURAL COMPANY

AMBULANCE SERVICE ENTITY:

SNOWFLAKE-TAYLOR AMBULANCE SERVICE

FOR THE PERIOD

FROM:

July 1, 2013

TO:

June 30, 2014

SCHEDULE OF REVENUES AND EXPENSES

Line No.	<u>DESCRIPTION</u>		
Operating Revenues:			
1	Total Ambulance Service Operating Revenue	(From: Page 2, Line 13)	\$ 919,177
<u>Settlement Amounts:</u>			
2	AHCCCS		83,202
3	Medicare		194,360
4	Subscription Service		
5	Contractual		
6	Other		
7	Total	(Sum of Lines 2 through 6)	277,562
8	Total Operating Revenue	(Line 1 minus Line 7)	\$ 641,615
Operating Expenses:			
9	Bad Debt		\$ 134,933
10	Total Salaries, Wages, and Employee-Related Expenses	(From: Page 2, Line 19)	407,000
11	Professional Services		45,013
12	Travel and Entertainment		
13	Other General Administrative		12,783
14	Depreciation		
15	Rent / Leasing		
16	Building / Station		26,000
17	Vehicle Expense		24,928
18	Other Operating Expense		22,410
19	Cost of Medical Supplies Charged to Patients		
20	Interest		
21	Subscription Service Sales Expense		
22	Total Operating Expense	(Sum of Lines 9 through 21)	673,067
23	Total Operating Income or (Loss)	(Line 8 minus Line 22)	\$ (31,452)
24	Subscription Contract Sales		
25	Other Operating Revenue		32,999
26	Local Supportive Funding		
27	Other Non-Operating Income (Attach Schedule)		
28	Other Non-Operating Expense (Attach Schedule)		
29	NET INCOME or (LOSS) Before Income Taxes	(Sum of Lines 23 through 27, minus Line 28)	\$ 1,547
Provision for Income Taxes:			
30	Federal Income Tax		
31	State Income Tax		
32	Total Income Tax	(Line 30, plus Line 31)	
33	Ambulance Service Net Income (Loss)	(Line 29, minus Line 32)	<u>1,547</u>

AMBULANCE REVENUE AND COST REPORT

FIRE DISTRICT and SMALL RURAL COMPANY

AMBULANCE SERVICE ENTITY: SNOWFLAKE-TAYLOR AMBULANCE SERVICE

FOR THE PERIOD FROM: July 1, 2013 TO: June 30, 2014

BALANCE SHEET

Current audited financial statements may be submitted in lieu of these pages.

See CAFR

ASSETS

CURRENT ASSETS

1	Cash	\$	_____	
2	Accounts Receivable		_____	
3	Less: Allowance for Doubtful Accounts		_____	
4	Inventory		_____	
5	Prepaid Expense		_____	
6	Other Current Assets		_____	
7	TOTAL CURRENT ASSETS			\$ _____

9	PROPERTY & EQUIPMENT			_____
10	Less: Accumulated Depreciation			_____

11	OTHER NON CURRENT ASSETS			_____
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12	TOTAL ASSETS			\$ _____
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LIABILITIES & EQUITY

CURRENT LIABILITIES

13	Accounts Payable	\$	_____	
14	Current Portion of Notes Payable		_____	
15	Current Portion of Long-Term Debt		_____	
16	Deferred Subscription Income		_____	
17	Accrued Expenses and Other		_____	
18	_____		_____	
19	_____		_____	
20	TOTAL CURRENT LIABILITIES			\$ _____

21	NOTES PAYABLE		_____	
22	LONG-TERM DEBT, OTHER		_____	
23	TOTAL LONG-TERM DEBT			_____

EQUITY & OTHER CREDITS

Paid-In Capital:

24	Common Stock		_____	
25	Paid-In Capital in Excess of Par Value		_____	
26	Contributed Capital		_____	
27	Retained Earnings		_____	
28	_____		-	
29	_____		-	
30	Fund Balance		-	
31	TOTAL EQUITY			_____

32	TOTAL LIABILITIES & EQUITY			\$ _____
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AMBULANCE REVENUE AND COST REPORT

AMBULANCE SERVICE ENTITY:

SNOWFLAKE-TAYLOR AMBULANCE SERVICE

FOR THE PERIOD

FROM:

July 1, 2013

TO:

June 30, 2014

STATEMENT OF CASH FLOWS

Current audited financial statements may be submitted in lieu of these pages.

See CAFR

OPERATING ACTIVITIES:

1 Net (loss) Income \$ _____

Adjustments to Reconcile Net Income to Net Cash

Provided by Operating Activities:

Note: a increase in these accounts improves cash flow

2 Depreciation Expense _____

3 Deferred Income Tax _____

4 Loss (gain) on Disposal of Property & Equipment _____

(Increase) Decrease in:

Note: a decrease in these accounts improves cash flow

5 Accounts Receivable _____

6 Inventories _____

7 Prepaid Expenses _____

Increase (Decrease) in:

Note: a increase in these accounts improves cash flow

8 Accounts Payable _____

9 Accrued Expenses _____

10 Deferred Subscription Income _____

11 NET CASH PROVIDED (Used) BY OPERATING ACTIVITIES

\$ _____

INVESTING ACTIVITIES:

12 Purchases of Property & Equipment _____

13 Proceeds from Disposal of Property & Equipment _____

14 Purchases of Investments _____

15 Proceeds from Disposal of Investments _____

16 Loans Made _____

17 Collections on Loans _____

18 Other _____

19 NET CASH PROVIDED (Used) BY INVESTING ACTIVITIES

FINANCING ACTIVITIES:

New Borrowings:

20 Long-Term _____

21 Short-Term _____

Debt Reduction:

22 Long-Term _____

23 Short-Term _____

24 Capital Contributions _____

25 Dividends Paid \$ _____

26 NET CASH PROVIDED (Used) BY FINANCING ACTIVITIES

27 NET INCREASE (Decrease) IN CASH

28 CASH AT BEGINNING OF YEAR

29 CASH AT END OF YEAR

SUPPLEMENTAL DISCLOSURES:

Non-cash Investing and Financing Transactions:

30 _____

31 _____

32 _____

33 Interest Paid (Net of Amounts Capitalized)

34 Income Taxes Paid

\$ _____